APPLICATION FOR HOLIDAY LICENSE FOR THE YEAR___*** RETURN APPLICATION AND FEE OF \$50 TO: TOWN CLERK, 283 COUNTY ROAD, BARRINGTON, RI 02806

NAME OF BUSINESS		
BUSINESS ADDRESS		
NAME OF OWNER		
PHONE: Home	Office	
Type of Business		
Holiday Hours	Daily Hours:	
I hereby certify that the above facts a	re true to the best of my knowledge.	
Signature of Owner/Proprietor		_
Print Name		_
Date		_
Subscribed to before me,		
Notary Public		_
Date filed with Town Clerk		
Date granted by Town Council		

PLEASE NOTE: No license shall be issued on December 25 of any year or on Thanksgiving Day unless the business qualifies under Section 5-23-2.